

## Chris Aquino

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**From:** WMATC E-Filing <administrator@wmatc.gov>  
**Sent:** Friday, January 22, 2016 11:57 AM  
**To:** Constantine Kolouas; Chris Aquino  
**Subject:** 2016 Annual Report - WMATC No: 2597, Carrier Name: Alilimo, Inc.

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### Washington Metropolitan Area Transit Commission 2016 Carrier Annual Report Form

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#### **FILING INFORMATION:**

- Each carrier holding a WMATC certificate of authority on January 1, 2016, must file a complete 2016 annual report and pay a \$175 annual fee on or before **February 1, 2016**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$150 late fee**. Each carrier that fails to pay the \$175 annual fee on time will be assessed a separate **\$150 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2016.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

#### **1. ANNUAL REPORT OF:**

**WMATC No.:** 2597

**Name of Carrier (as shown on certificate of authority):** Alilimo, Inc.

**Trade Name:**

**Principal Place of Business**

**Street Address:** 6012 crocus court

**Apt./Suite:**

**City:** Alexandria

**State:** VA

**Zip:** 22310

**Mailing Address (if different from street address)**

**Street:** po box# 10041

**Apt./Suite:**

**City:** Alexandria

**State:** VA

**Zip:** 22310

**E-mail:** [elali74@hotmail.com](mailto:elali74@hotmail.com)

**Maryland PSC No.:**

**E-mail:** [elali74@hotmail.com](mailto:elali74@hotmail.com)

**E-mail:**

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**6. \*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below or (2) upload a complete vehicle list to this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

| <b>Fleet No.</b> | <b>Year*</b> | <b>Make*</b> | <b>Vehicle VIN*</b> | <b>License Plate*</b> | <b>State*</b> | <b>Seating Cap.*</b> | <b>Wheel Chair</b> |
|------------------|--------------|--------------|---------------------|-----------------------|---------------|----------------------|--------------------|
| 1                | 2013         | GMC          | 1GKS1KE01DR289857   | H524437               | VA            | 6                    |                    |
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|                  |              |              |                     |                       |               |                      |                    |

**\*Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.**

**7. \*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

**Name:** Abdelali elkamouni

**Title:** President

**Date:** 01/22/2016